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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: KFranco@ccmcgs.com

# FLORIDA LIMITED LIABILITY CO.

#### Recess License LLC

Certificate of Status 0 Certified Copy  $\mathbf{0}$ Page Count 03 Estimated Charge \$125.00

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### ARTICLES OF ORGANIZATION OF Recess License LLC

ARTICLE I

NAME:

The name of the limited liability company is: Recess License LLC

ARTICLE II

**ADDRESS** 

The principal place of business and mailing address of this Limited Liability Company shall be: 615 E Harding Street, Orlando, Florida 32806.

## ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 1200 South Pine Island Road, Plantation, Florida 33324. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Si !			
Signature:		Date: October 22, 2020	
Mark V	Villiams, A.V.P. Business Filings Incorporated		

#### ARTICLE IV MANAGERS/MEMBERS

1/1/1

The management of the limited liability company is reserved for the managers and the name and address of the manager of the Limited Liability Company is:

Act Up Entertainment LLC, 615 E Harding Street, Orlando, Florida 32806

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ARTICLE V

DURATION

The duration for the limited liability company shall be: Perpetual.

Act Up Entertainment LLC, Organizer

Craig Mateer, Manager Authorized Representative

(In accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.155; E.S.)

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